

# IMPORTANT LEGAL DOCUMENT

## ANNUAL STREET LISTING

← If this address is incorrect, make corrections below

[illegible]

"NO" IN THE VOTER COLUMN NEXT TO YOUR NAME, MEANS YOU ARE NOT REGISTERED TO VOTE.

**THIS FORM DOES NOT REGISTER YOU TO VOTE**

[illegible]

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**SPECIAL INSTRUCTIONS:** Return IMMEDIATELY.

COMPLIANCE with this State requirement provides proof of residence to protect voting rights, veteran's bonus, housing for the elderly and related benefits as well as providing information for selection of jurors. This form DOES NOT register you as a voter.

**GENERAL INSTRUCTIONS: Please Print**

- 1. Verify and/or complete all information listed on the form.
- 2. List ALL family or household members whose legal address is the same. Include any member of the family in Military Service, away at school or confined to a rest home whose legal residence is the same.
- 3. Make all changes on the SHADED LINE below the printed line.
- 4. If a NEW MEMBER has been added to the family or household, enter the name and information on the blank line at the end of this form.
- 5. Put a line through the name of any resident no longer residing at this address and list his/her new address.
- 6. MOVED/DECEASED - Enter "M" or "D" if appropriate.
- 7. MAIL TO - Designates the person in your household to whom mail should be addressed. If you wish to change enter an "X" next to that individuals name.
- 8. OCCUPATION: Enter occupation not place of employment.
- 9. NATIONALITY - Enter only if not U.S. citizen.
- 10. VETERAN: Check if you are a U.S. Veteran.
- 11. To return this form, tri-fold form and insert into return envelope provided and mail.

Thank you for your cooperation.

↑ PLEASE DETACH BEFORE MAILING ↑  
MAIL IN DOG REGISTRATION FORM

SEND THIS FORM ALONG WITH CURRENT RABIES VACCINATION RECORD AND SPAYING/NEUTERING CERTIFICATE.

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

DOG'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ COLOR: \_\_\_\_\_ BREED: \_\_\_\_\_

CHECK ONE: \_\_\_\_\_ MALE \$20.00 \_\_\_\_\_ NEUTERED MALE \$10.00 \_\_\_\_\_ FEMALE \$20.00 \_\_\_\_\_ SPAYED FEMALE \$10.00

MUST INCLUDE A STAMPED SELF-ADDRESSED ENVELOPE WITH A CHECK MADE PAYABLE TO THE "TOWN OF WILBRAHAM"  
\*\*\*\* DUE TO POSTAL REGULATIONS- PLEASE ALLOW .59 CENTS FOR RETURN POSTAGE. \*\*\*\*

MAIL TO: TOWN CLERK  
240 SPRINGFIELD ST  
WILBRAHAM, MA 01095

\*\*\*\*LICENSES ARE DUE BY MARCH 31, 2013  
\*\*\*ANY QUESTIONS, CALL 596-2800 EXT. 200 \*\*\*\*  
MAY BE RETURNED WITH CENSUS FORM

\*\*\*\*\*IF MORE THAN ONE DOG, PLEASE PROVIDE INFORMATION ON THE BACK OF THIS FORM\*\*\*\*\*